CANDIDATE'S ELECTION DAY EXPENDITURES

(to be filed by a candidate or his principal compalign committee)

This report is required to be filed by all candidates who are required to file campaign finance disclosure reports are it no election day expenditures were made. The report is due not later than 10 days after the primary election, and, again, not later than 10 days after the general election if the candidate participates in the general election. This form is used to report payments by the candidate or his political committee (1) for advertising that is broadcast or published on election day. (2) for the services of election day workers, and (3) to organizations for election day activities in support of the candidate. NOTE: This report is required in addition to all other required reports. Therefore, the expenditures reported on this report must be reported in subsequent Candidate's Reports' for this election.

Full Name and Addmiss of Candidate		00, Baton Rouge, LA 70809-70179.		
Ralph Petin. Jr. 9 224 H ighway 44 Convent IJ 70723	2.Office Sought (Include title of office as well as perish, city, town and/or election district) Councilman 51. James Parish	OFFIGE USE ONLY		
		Š.		
 Name and address of principal campaign committee (Applicable only if campate has a principal campaign) 	gn committee)	21 CO		
	Please see attached sheets.	<u> 2</u>		
A. Date of Primary Election		7: 54		
5 Total Expenditures by Category	<u></u>	100 1100 House 100 House 1		
a. Television Advertising (Schedu	ile A)	0.00		
b. Radio Advertising (Schedule A	0.00			
c. Newspaper Advertising (Sched	0.00			
d. Services of Election Day Work	700.00			
 e. Payments to Organizations for Day Activities/Serulces (Schero 	0.00			
For any category in which no election day expanditures be onlitted from this report.	ware made, write -o- next to the category in Item	5. Any achequiles not required to be completed may		
6 a. Name of Person Preparing Recort	6 b. Daylime Telephone			
7. WE HEREBY CERTIFY that the information contain information and belief, and that no election day expend reported by the Louislana Campa gui Finance Disclosur	Mures Nove been made that have not bean reporte	e and correct to the best of our knowledge, and herein, and		
Dated 11/26/2007 Signalarie of Canadate Chairperson (10/	to signed by making committee)	(225) 562-3802 Dayling Telephone Number		
Signature of Treasurer		Daytime Telephone Number		

Affiliated Persons / Organizations		214			
Mine and Address of Person Preparing Penon Ralph A Patin, Jr.	Candidate Information Office Spught (Include title of office sa well as parish, tity, town and or election district)				
	Name of Political Party:				
Nalityerson: laytime Telephone (Prepaper); (225) 562 3602	SUPPORTED OPPOSED by the Committee				
Annual Lamburgh A. Laborati's ISEO OFF ONE	Rel of Aff. Org. to Comm:	37.5			

SCHEDULE B: ELECTION DAY WORKERS

The following information must be provided for each individual to whom an expenditure was made for services performed on election day. Also, the information must be provided for each individual performing services on election day to whom a monetary expenditure was made by an organization to which a payment was made by the candidate completing this report. Such an organization is required by law to furnish this information to the candidate completing this report.

Name and Address of Recipient			2. Social Security Number	3. Amount Paid	Organization Making Payment (if applicable)
Convad Benn 3270 Highway 44	-100-0000			75.00	1,000
Convent	L.F	70723			
Dalphine Benn 9313 Waler Tower St.				75.00	
Convent	80	/0723			
Wanda Bush 9186 Ester St.	<u>08-4986</u>	- 13		75.00	
Convent	÷v.	70723			
Nicola Gibbs 8168 Rev. Thomas Scrittist	500 - 55 10-			75.00	Marth ov 200
Convent	Lie	70723			
Jayoe Jones 9296 Water Tower St.	26 - 3V62	5375		75.00	
Convent	LA	70723	10.		
Gladys Maddie 8296 Pleasent Hill St.	-75-7-55		15	100.00	
Convent	L.v	70723			
Eddie Shaw 10498 Legion Si.				75.00	
Convent	LX	/0723			
Kent Washington 10155 Legion St.	<u> </u>		33	75.00	
Convent	LA	70723			

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1. Name and Address of Recipient			2. Social Security Number	3. Amount Paid	4. Organization Making Payment (if applicable)
Vernon Youngblood 10098 Highway 44				75.00	
Convent	l.F	70723	Î		

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